U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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1. File Number U - 1076 8

3. Name and address of person filing.

Name RAVL GARCIA

JR.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

Ol 101 64 Through: 12 /31 /04

4. Name, file number, and address of labor organization.

Name AZ. OPERATING ENGINEERS APPRENTICESHIP

	Labor Organization File Number 040109		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 10797 W. RANDOLPH Rd.	Street 10797 W. RANDOLPH Rd.		
City CASA GRANDE	city CASA GRANDE		
State 4-2 ZIP Code +4 85222			
5. Position in labor organization. ADMINISTRATIVE MANAGER			
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any NOT APPL	1 C A P L E 7.b. Amount.		
Street Additional Control of the Con	•		
City Control of the C	And the second s		
State ZIP Code + 4			
Signature			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			
Def y State of the	See a AND Compared A		
Signed Hauf Harris h	On <u>8-15-05</u> <u>602 252-1844</u> Date Telephone Number		
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name AZ OPERATING ENGINEERS APRENTICESHIP

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 10797 W. RANDOLPH Rd.

CASA GRANDE

State A-

ZIP Code +4 85 22 2

9. Business deals with:

a. Labor Organization

b. Trust Az. OP. ENG. APP

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing. FULL TIME ADMINISTRATIVE MANAGER

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

NOT APPLICABLE

SALARY #54,833,74

EXP. REIMBURSEMENTS \$ 1496.75

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name AZ OPERATING ENGINEERS APPRENTICESTIP

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 10797 W. RANDOLPH Rd.

CASA GRANDE

State ARIZONA

ZIP Code + 4 85222

13.b. Is the Business an Employer or Consultant

14.b. Amount of payment.

#56,330,49